



**POLICE DEPARTMENT**

Insert Copy of ID Here

Incident # \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Middle Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Social Security # \_\_\_\_\_ Driver Lic # \_\_\_\_\_ State \_\_\_\_\_

Current Address \_\_\_\_\_

City, State Zip \_\_\_\_\_

Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_

Agency/Firm Requesting Fingerprints \_\_\_\_\_

Signature \_\_\_\_\_

**Please Note:**

Fingerprinting services will be provided Monday through Friday from 9am-4pm).

- Valid, State issued ID or passport is required
- Fee is \$10.00 for 1 or 2 cards and is payable by cash only. **Exact amount required.**



POLICE DEPARTMENT

# Fingerprinting COVID-19 Pre-Screening

Name \_\_\_\_\_ DOB \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Incident# \_\_\_\_\_

### Travel History

- 1. In the past 14 days, have you traveled outside of Oklahoma? \_\_\_Yes\_\_\_No  
When \_\_\_\_\_ Where \_\_\_\_\_

### Contact History

- 2. Have you or anyone you've been in contact with had a laboratory confirmed positive COVID-19 test? \_\_\_Yes\_\_\_No
- 3. Do you currently have a fever, cough, shortness of breath, or other symptoms of lower respiratory illness? \_\_\_Yes\_\_\_No

**Temperature at time of fingerprinting: \_\_\_\_\_°F**

Additional Information :

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\*If you currently have symptoms (fever, cough, shortness of breath, or difficulty breathing) you will not be approved to receive fingerprinting services from the Yukon PD.

\*In order to receive fingerprinting services, you will be required to wear a face covering as approved by the CDC before entering the police department and during the finger printing process. You will also be required to wash your hands with soap and water prior and after fingerprinting.

**Requester Name and Signature** \_\_\_\_\_ **Date & Time** \_\_\_\_\_

**Reviewer Name and ID #** \_\_\_\_\_ **Date & Time** \_\_\_\_\_